

# FY2005 Nomination Form

## Kentucky Poet Laureate Program

### Deadline: September 30, 2004

*Please refer to the guidelines and instructions.*

<b>I. Nominee Info.</b>  US Congressional District _____  KY Senate District _____  KY House District _____  To look up district info., use <a href="http://www.vote-smart.org">www.vote-smart.org</a> or Call your County Clerk's office.	Salutation <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Dr. <hr/> First Name _____ Last Name _____ <hr/> Nominee's Organization (if any) _____ Title (if any) _____ <hr/> Mailing Address _____ <hr/> City _____ State _____ Zip Code - Plus 4 _____ County _____ <hr/> Phone # _____ E-Mail Address _____ <hr/>
Check the one(s) <input type="checkbox"/> that represent(s) the race/ethnicity of the nominee. Select <b>ALL</b> that apply.	<b>Nominee Race / Ethnicity:</b>  <input type="checkbox"/> American Indian/Alaska Native <span style="margin-left: 100px;"><input type="checkbox"/> Asian</span> <input type="checkbox"/> Native Hawaiian/Pacific Islander <span style="margin-left: 100px;"><input type="checkbox"/> Black/African American</span> <input type="checkbox"/> Hispanic/Latino <span style="margin-left: 100px;"><input type="checkbox"/> White</span>
<b>II. Nominator Info.</b> Nomination Submitted By: _____	Salutation <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Dr. <hr/> First Name _____ Last Name _____ <hr/> Nominee's Organization (if any) _____ Title (if any) _____ <hr/> Mailing Address _____ <hr/> City _____ State _____ Zip Code - Plus 4 _____ County _____ <hr/> Phone # _____ Second Phone # _____ FAX # _____ <hr/> E-Mail Address _____ Web Address _____ <hr/>

KAC Staff Use ONLY					
FY: <u>2005</u>	APP #: _____	CLIST #: _____			
App Status: <u>01</u>	App Institution: <u>01</u>	App Discipline: <u>10</u>			
Grantee Race: _____	Project Discipline: <u>10</u>	Activity: <u>99</u>			
Project Race: <u>99</u>	Grant Program: <u>POET</u>	Date Received: _____			

### ***Instructions for Completing Narrative***

To assist panelists in reading the nomination, duplicate the number and heading of each subject and performance expectation (e.g. Biographical Description) before your response to that item. Place the nominee's name and the words "Kentucky Poet Laureate" in the upper right hand corner of the page.

### ***Narrative Outline***

Please respond to the Introduction and each of the Performance Expectations in a one-page narrative. Include complete information on each bulleted item, in the order below, when writing your narrative.

#### ***Introduction***

Please provide a concise biographical description outlining the nominee's literary background and experience as a Kentucky writer. You may attach the nominee's resume (two-page maximum).

#### ***Performance Expectations***

##### **1. Publication of written body of work which is informed by living in Kentucky**

- Provide a list of the nominee's published works. You may attach sample books or other writings.

##### **2. Critical acclaim for the work's high degree of creativity and clarity of form and style as demonstrated by the receipt of special honors, awards, and other forms of recognition**

- List the nominee's special honors, awards, and other forms of recognition. You may attach feature articles, reviews, and letters of recommendation.

##### **3. Capacity to promote the literary arts in Kentucky through readings and/or public presentations at meetings, seminars, conferences, and other programs across the state, including Kentucky Writers' Day**

- Describe the nominee's ability to interact with the public in promoting participation in the literary arts of the state.

Do not send originals of any attached supporting materials. If you would like the supporting materials returned, please enclose a self-addressed, postage-paid mailer with your nomination form.

### ***Nomination Submitted By***

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Thank you for your nomination*

### **Mailing Address for Completed Nomination**

Kentucky Arts Council  
Old Capitol Annex  
300 West Broadway  
Frankfort, KY 40601-1980